PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10/632,955

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
Γ,	STAL OLÁMO		(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			35					RATE	FEE]	RATE	FEE
FC)R			NUMBER FILED		NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	75 <u>0</u> .00
TC	TAL CHARGEA	ABLE CLAIMS	35 _{minus 20=}		* 15			X\$ 9=	135	OR	X\$18=	
	DEPENDENT CL		5 mi	5 minus 3 =		* 2		X42=	84	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, en					r "0" in ·c	olumn 2	L	TOTAL	594	ÓR	TOTAL	
CLAIMS AS AMENDED - PART II							-			•	OTHER	
_		(Column 1) CLAIMS	Brown St.	(Colun		(Column 3)	-	SMALL		OR	SMALL	-
ENT A		REMAINING AFTER AMENDMENT		NUME PREVIC PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus :	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- CLAINA	-		X42=		OR	X84=	
Ļ	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	'ENDEN I	CLAIM			+140=		OR	+280=	
							^	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		^	.טטוו. רכב ב			AUDII. FEL	· · · · · · · · · · · · · · · · · · ·			
ENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIC PAID I	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	T	X42=		OR	X84=	
	FIRST PHESE	ENTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		T	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	Ai	DDIT. FEE L		J ,	ADDIT. FEE	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus ·	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPEND				CLAIM		-			UH		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Paid					foun	id in the app	ropriate box	in colu	umn 1.	